

JFW

PATENT
Docket No. 20004/20A-US

IN THE UNITED STATES PATENT
AND TRADEMARK OFFICE

Applicant(s): Lu et al.

) I hereby certify that this paper is
being deposited with the United
States Postal Service with
sufficient postage as first class
mail in an envelope addressed to:
Commissioner for Patents, P.O.
Box 1450, Alexandria, VA 22313-
1450 on this date:

Serial No.: 09/909,224

) April 19, 2006

Filed: July 19, 2001

)

James A. Flight
Registration No.: 37,622
Attorney for Applicant(s)

For: "Audience Measurement System for
Digital Television"

Group Art Unit: 2617

Examiner: Justin E. Shepard

RECEIVED

APR 25 2006

OFFICE OF PETITIONS

AMENDMENT TRANSMITTAL WITH
PETITION FOR EXTENSION OF TIME

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is a response to the Office action pending in the above
application.

04/26/2006 CKHLOK 00000004 09909224
01 FC:1253 1020.00 OP

1. Small Entity Status

- Verified statement(s) claiming small entity status is(are) attached.
- Small entity status has been established and is still effective.
- Has not been established.

2. Extension of Time

- This is a petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

EXTENSION (Months)	FEE FOR LARGE ENTITY		FEE FOR SMALL ENTITY	
One Month		\$120.00		\$60.00
Two Months		\$450.00		\$225.00
Three Months	X	\$1020.00		\$510.00
Four Months		\$1,590.00		\$795.00
Fifth Month		\$2,160.00		\$1,080.00

If an additional Extension of Time is required, please consider this a petition therefor.

Extension Fee: \$1020.00

- An extension for month(s) has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

Deduction: \$0.00

Extension Fee Due With This Request \$1020.00

3. Fee for Claims

The fee for additional claims [(37 CFR 1.16(b)-(d)] has been calculated as shown below:

				SMALL ENTITY		OTHER THAN A SMALL ENTITY		
	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee	
TOTAL	55	MINUS	83	= 0	x25=	\$	x50=	\$0
INDEP.	7	MINUS	15	= 0	x100=	\$	x200=	\$0
First Presentation of Multiple Dependent Claim				+180=	\$	+360=	\$	
TOTAL ADDITIONAL FEE					\$	OR	\$	

4. Method of Payment of Fees

Attached is a check in the amount of: \$1020.00

Charge Deposit Account No. 50-2455 in the amount of: \$ _____

A copy of this Transmittal is enclosed.

5. Deposit Account and Refund Authorization

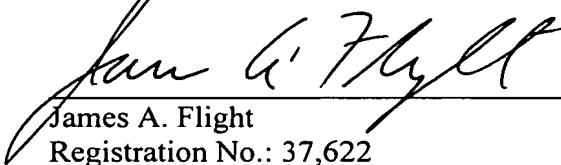
The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-2455. A copy of this Transmittal is enclosed.

Please refund any overpayment to Hanley, Flight & Zimmerman, LLC at the address below.

Respectfully submitted,

HANLEY, FLIGHT & ZIMMERMAN, LLC
USPTO Customer Number 34431
20 North Wacker Drive
Suite 4220
Chicago, Illinois 60606
(312) 580-1020

By:


James A. Flight
Registration No.: 37,622

April 19, 2006